



Arizona Game & Fish Department  
5000 W. Carefree Highway  
Phoenix, AZ 85086-5000

LIFETIME LICENSE APPLICATION

	<u>Age 0-13</u>	<u>Age 14-29</u>	<u>Age 30-44</u>	<u>Age 45-61</u>	<u>Age 62+</u>
<input type="checkbox"/> Resident Lifetime Class A General Fishing License	<input type="checkbox"/> \$425.00	<input type="checkbox"/> \$450.00	<input type="checkbox"/> \$400.00	<input type="checkbox"/> \$375.00	<input type="checkbox"/> \$200.00
<input type="checkbox"/> Resident Lifetime Class G General Hunting License	<input type="checkbox"/> \$595.00	<input type="checkbox"/> \$630.00	<input type="checkbox"/> \$560.00	<input type="checkbox"/> \$525.00	<input type="checkbox"/> \$280.00
<input type="checkbox"/> Resident Lifetime Class F Combo General Hunt/Fish/Trout	<input type="checkbox"/> \$1,020.00	<input type="checkbox"/> \$1,080.00	<input type="checkbox"/> \$960.00	<input type="checkbox"/> \$900.00	<input type="checkbox"/> \$480.00
<input type="checkbox"/> Resident Lifetime Trout Stamp	<input type="checkbox"/> \$255.00	<input type="checkbox"/> \$270.00	<input type="checkbox"/> \$240.00	<input type="checkbox"/> \$225.00	<input type="checkbox"/> \$120.00
<input type="checkbox"/> Lifetime Wildlife Benefactor \$1,000					

Sportsman I.D. Number \_\_\_\_\_ Residency Years: \_\_\_\_\_ Purchase Is: ☐ For Self  
Social Security # May Be Used \_\_\_\_\_ ☐ As A Gift

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Area Code: \_\_\_\_\_ Telephone Number: \_\_\_\_\_ Sex: \_\_\_\_\_ Weight: \_\_\_\_\_ Height: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

I hereby affirm that the person for whom this license is being purchased has been a bona fide resident of the State of Arizona for at least six months immediately preceding the date of this application. OR has been a member of the Armed Forces of the United States on active duty and stationed in this state for a period of thirty days immediately preceding the date of this application, AND that the date of birth and age of that person as provided on this application are true and correct. I understand that pursuant to A.R.S. §17-341, it is unlawful for a person to obtain a license to take wildlife by fraud or misrepresentation, and that a license so obtained is void and of no effect from the date of the issuance.

An original or certified copy of the applicant's birth certificate, driver's license, Motor Vehicle Division identification card or U.S. Passport must accompany each application. These items will be returned to the applicant. Photocopies are subject to verification.

I understand that this license is non-transferable and non-refundable.

\_\_\_\_\_  
Signature of Purchaser Printed Name Date

If this License is to be mailed to any address other than the one shown above, complete the information below:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

AGFD USE ONLY

Date Issued: \_\_\_\_\_  
Amount Paid: \_\_\_\_\_  
Effective Date: \_\_\_\_\_  
CSR Initial: \_\_\_\_\_

Lost Lifetime License, except for trout stamp, may be replaced for \$4.00. Please return this application with your remittance to the address shown above.